

**Work Order ID 107203**

September-23-13 11:23:41 AM

**\*107203\***

Page 1

**Item ID:** D3914-041

Accept

**\*N900040100\***

Setup Start

**\*NS1\***

**Revision ID:**

**Item Name:** Long Basket Lid Assembly (350)

Stop

**\*NS2\***

**Start Date:** 10/07/13    **Start Qty:** 1.00

**\*1\***

**Cust Item ID:**

**Required Date:** 10/07/13    **Req'd Qty:** 1.00

**\*1\***

**Customer:**

**Reference:**

**Approvals:**

**Process Plan:** *pl*

**Date:** *10/23* **Tooling:**

**Date:**

Run Start

**\*NR1\***

**QC:**

**Date:**

**Date:**

Stop

**\*NR2\***

<b>Sequence ID/ Work Center ID</b>	<b>Operation Description</b>	<b>Set Up/ Run Hours</b>	<b>Tool ID</b>	<b>Tool #</b>	<b>Plan Code</b>	<b>Accept Qty</b>	<b>Reject Qty</b>	<b>Reject Number</b>	<b>Insp. Stamp</b>
----------------------------------------	----------------------------------	------------------------------	----------------	---------------	----------------------	-----------------------	-----------------------	--------------------------	------------------------

<b>Draw Nbr</b>	<b>Revision Nbr</b>
D3914	C
D4020	A

100 Weld per dwg A/R S.S. rod Batch: *B123823* 0.00

**\*100\*** Large Fab

Large Fab

Large Fab

**Memo** 0.00

1- assemble ribs , weld as per dwg D3914 using DT9607A

2- weld hinge (3) and Mounting brackets as per dwg D3914

\*\*\*Visual inspect before welding mesh\*\*\*

3- tack weld mesh on basket as per dwg D3914

\*\*\*Cut out mesh where label plate goes in center off basket lid as per dwg D4020-5. Make sure to place mesh correctly on lid, check with label plate before tacking mesh\*\*\*

110

QC9- Inspect visual per QSI004- Fusion Welds 0.00

**\*110\***

QC

Quality Control

**Memo** 0.00

*13.11.01*

DAS

9

9.89

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: Date:

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Use-as-is <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>		
			Work Order Update <input type="checkbox"/>			Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>		
						Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>		
						Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>			
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance			Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear				General							
				Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>			
				Centre Not Concentric to O/S <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Hardware <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>			
				Cracks <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Weld <input type="checkbox"/>			
				Crushed/Crimped <input type="checkbox"/>	Burrs <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>			
				Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Part Moved <input type="checkbox"/>				
				Heat Treat <input type="checkbox"/>	Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>				
				Inspection Strip in Tube <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>				
				Ripples in Bend <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>	Other <input type="checkbox"/>				
				Torque Waves in Extrusion <input type="checkbox"/>	Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>					
				Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>					
				Wave/Twist in Tube <input type="checkbox"/>	Folio <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>					

**Work Order ID 107203**

September-23-13 11:23:41 AM

**\*107203\***

Page 2

**Item ID:** D3914-041

Accept

**\*N900040100\***

Setup Start

**\*NS1\***

**Revision ID:**

**Item Name:** Long Basket Lid Assembly (350)

Stop

**\*NS2\***

**Start Date:** 10/07/13    **Start Qty:** 1.00

**\*1\***

**Cust Item ID:**

**Required Date:** 10/07/13    **Req'd Qty:** 1.00

**\*1\***

**Customer:**

**Reference:**

**Approvals:**

**Process Plan:**

**Date:**

**Tooling:**

**Date:**

Run

Start

**\*NR1\***

**QC:**

**Date:**

**SPC (Y/N):**

**Date:**

Stop

**\*NR2\***

**Sequence ID/  
Work Center ID**

**Operation  
Description**

**Set Up/  
Run Hours**

**Tool ID**

**Tool #**

**Plan  
Code**

**Accept  
Qty**

**Reject  
Qty**

**Reject  
Number**

**Insp.  
Stamp**

120

**\*120\***

QC

Quality Control

QC5- Inspect part completeness to step on W/O

0.00

13-11-01

DAS

9

9-89

130

**\*130\***

Powdercoat

Powder Coating

Black Sandtex(Ref:4.3.5.7) per QSI005 4.3

0.00

1/12/14

DAS

34

9-89

Memo

0.00

\*\*\* mask sides of hinge prior to powdercoat\*\*\*

Start Time: 8:55

Oven Temperature: 300

Finish Time: 9:05

140

**\*140\***

HandFinish

Hand Finishing

Wing Walk as per dwg QSI005 4.4 Batch 14000

0.00

1/12/14 13-11-06

Memo

1- Mask data plate and apply wing walk on outside surface of mesh as per dwg

2- Install placard and label as per dwg

\*\*\*Mask label plate to size of label, use scotchbrite red pad to lightly sand area  
for label, apply label \*\*\* M 12-14 )

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS							
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>						
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>						
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>						
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>							
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector				
Doc/Data													
Equip/Tooling													
Operator													
Material													
Setup													
Other													
Process													
Supplier													
Training													
Unapproved													
FAULT CATEGORY													
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions						<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other			

**Work Order ID 107203**

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**\*107203\***

Page 3

Item ID: D3914-041

Accept

**\*N900040100\***

Setup Start

**\*NS1\***

Revision ID:

Item Name: Long Basket Lid Assembly (350)

Stop

**\*NS2\***

Start Date: 10/07/13 Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 10/07/13 Req'd Qty: 1.00

**\*1\***

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start

**\*NR1\***

QC:

Date:

SPC (Y/N):

Date:

Stop

**\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

150

**\*150\***

QC

Quality Control

QC3- Inspect Part Finish

0.00

DAS

27

9-89

B1104

160

**\*160\***

Packaging

Packaging

Identify as per dwg & Stock Location: W10

0.00

D4030-041 / B107247

1x of M.03/100r

170

**\*170\***

QC

Quality Control

QC21- Final Inspection - Work Order Release

0.00

Memo

0.00

JF/Rm 13/11/07

MF  
13-11-05

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS							
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>						
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>						
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>						
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>							
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector				
Doc/Data													
Equip/Tooling													
Operator													
Material													
Setup													
Other													
Process													
Supplier													
Training													
Unapproved													
FAULT CATEGORY													
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions						<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other			

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<b>Work Order ID:</b>	107203	<b>Start Date:</b>	10/07/13	<b>Required Date:</b>	10/07/13
<b>Parent Item:</b>	D3914-041	<b>Start Qty:</b>	1.00	<b>Required Qty:</b>	1.00
<b>Parent Item Name:</b>	Long Basket Lid Assembly (350)				

**Comments:** IPP Rev:A new issue DD 10.03.19 verified by:EC IPP Rev:B as per dwg revB DD  
10.08.18 verified by:EC IPP Rev:C 13.03.14 AS PER DWG REV.pc1 DD VERF:JLM  
IPP REV:D 13.06.21 DWG REV.C DD VERF:JFS

Component Item ID/ Item Name	Item ID	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D3914-1 Rib			Manufactured	No			100	Each	8.0000	2	2		CC 13-10-31	
					<u>Location</u>		<u>Loc Qty</u>	<u>Loc Code</u>						
					WA004		4	B103367 →					(2x)	
					103366		2							
					88645		2							
					WA005		4							
					81449		1							
					82131		1							
					87079		1							
					97660		1							
D3914-7 Rib			Manufactured	No			100	Each	7.0000	2	2		CC 13-10-31	
					<u>Location</u>		<u>Loc Qty</u>	<u>Loc Code</u>						
					WA005		7	B103521 →					(2x)	
					103362		2							
					82928		3							
					88649		1							
					97949		1							
D4018-5 Rib			Manufactured	No			100	Each	15.0000	9	9		CC 13-10-31	
					<u>Location</u>		<u>Loc Qty</u>	<u>Loc Code</u>						
					WA004		12	B107230 →					(9x)	
					97933		12							
					WA005		3							
					100347		3							

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: Date:

Work Order: _____	<b>DISPOSITION</b>	<b>AGAINST DEPARTMENT/PROCESS</b>					
Part No. _____	Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>		
NCR No. _____	Work Order Update <input type="checkbox"/>						

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

<b>Landing Gear</b>		<b>General</b>									
Bending	<input type="checkbox"/>	Bend	<input type="checkbox"/>	Grain	<input type="checkbox"/>	Ovalized	<input type="checkbox"/>	Pressure/Forced			
Centre Not Concentric to O/S	<input type="checkbox"/>	BOM/Route	<input type="checkbox"/>	Hardware	<input type="checkbox"/>	Over/Under tolerance	<input type="checkbox"/>	Temperature/Cure			
Cracks	<input type="checkbox"/>	Broken/Damaged	<input type="checkbox"/>	Inspection Incomplete	<input type="checkbox"/>	Part Incorrect	<input type="checkbox"/>	Weld			
Crushed/Crimped	<input type="checkbox"/>	Burrs	<input type="checkbox"/>	Instructions Incomplete/Unclear	<input type="checkbox"/>	Part Lost/Missing	<input type="checkbox"/>	Wrong Stock Pulled			
Cuffs	<input type="checkbox"/>	Contamination	<input type="checkbox"/>	Maintenance	<input type="checkbox"/>	Part Moved	<input type="checkbox"/>				
Heat Treat	<input type="checkbox"/>	Countersink	<input type="checkbox"/>	Mislabeled	<input type="checkbox"/>	Positioned Wrong	<input type="checkbox"/>				
Inspection Strip in Tube	<input type="checkbox"/>	Cut Too Short	<input type="checkbox"/>	Misread	<input type="checkbox"/>	Power Loss/Surge	<input type="checkbox"/>				
Ripples in Bend	<input type="checkbox"/>	Drill Holes	<input type="checkbox"/>	Offset	<input type="checkbox"/>	Other	<input type="checkbox"/>				
Torque Waves in Extrusion	<input type="checkbox"/>	Drawing	<input type="checkbox"/>	Out of Calibration	<input type="checkbox"/>		<input type="checkbox"/>				
Turning Sequence	<input type="checkbox"/>	Finish	<input type="checkbox"/>	Out of Sequence	<input type="checkbox"/>		<input type="checkbox"/>				
Wave/Twist in Tube	<input type="checkbox"/>	Folio	<input type="checkbox"/>	Outside Dimensions	<input type="checkbox"/>		<input type="checkbox"/>				

# Picklist Print

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Page 2

**Work Order ID:** 107203

**Parent Item:** D3914-041

**Parent Item Name:** Long Basket Lid Assembly (350)

**Start Date:** 10/07/13

**Required Date:** 10/07/13

**Start Qty:** 1.00

**Required Qty:** 1.00

D4035-043 Lid Rib Assembly, Aft (350 Basket)	Manufactured	No	100	Each	13.0000	2	2	CC 13-10-31
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<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
WA004	6	B108589 → (2x)
106346	2	
97686	1	
97687	3	
WA005	7	
81202	1	
81452	1	
82988	1	
98841	4	

D2581 Mounting Bracket	Manufactured	No	100	Each	103.0000	2	2	CC 13-10-31
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<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
WA004	103	
103076	24	(2x)
103952	17	
105886	48	
70766	2	
81253	1	
82506	2	
83230	3	
85452	2	
87706	2	
99837	2	

D4016-3 Hinge Half, Lid	Manufactured	No	100	Each	73.0000	3	3	CC 13-10-31
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<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
WA	37	
103029	37	(3x)
WA004	36	
102214	8	
104365	8	
106882	20	

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: Date:

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS						
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio		<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <hr/> <hr/> <hr/>	
										<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <hr/> <hr/> <hr/>	
										<input type="checkbox"/> Other	

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Work Order ID: 107203

Parent Item: D3914-041

Parent Item Name: Long Basket Lid Assembly (350)

Start Date: 10/07/13

Required Date: 10/07/13

Start Qty: 1.00

Required Qty: 1.00

D4020-5  
Mesh (350 Basket Long, Lid)

Manufactured No

100 Each 4.0000

1

1

CC 13-10-30

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
WA004	3	B107300 → (lx)
100416	3	
WA007	1	
98400	1	

D4021-3  
Data Plate

Manufactured No

100 Each 47.0000

1

1

CC 13-10-30

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
WA004	47	(lx)
101346	37	
80897	9	
82507	1	

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

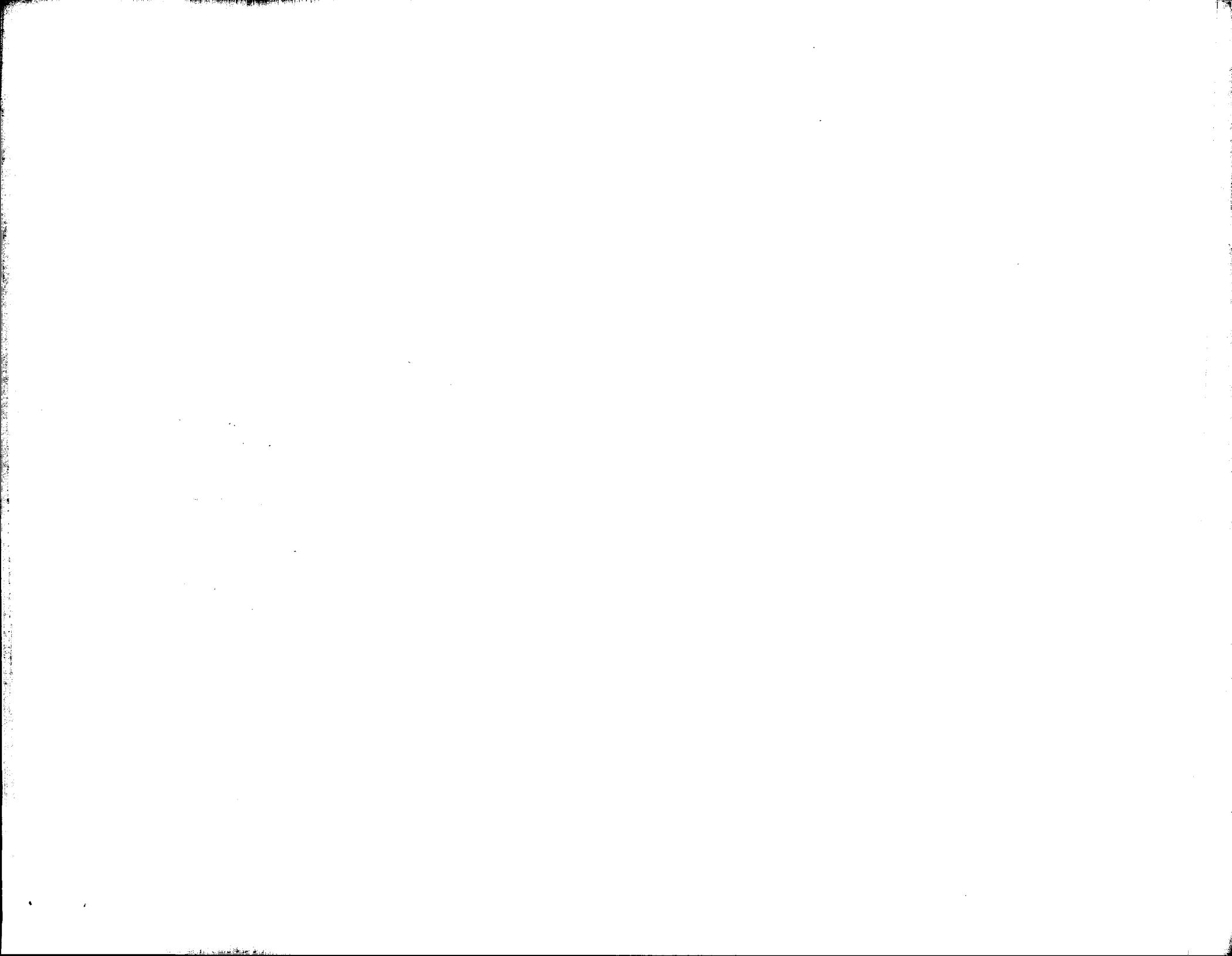
QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

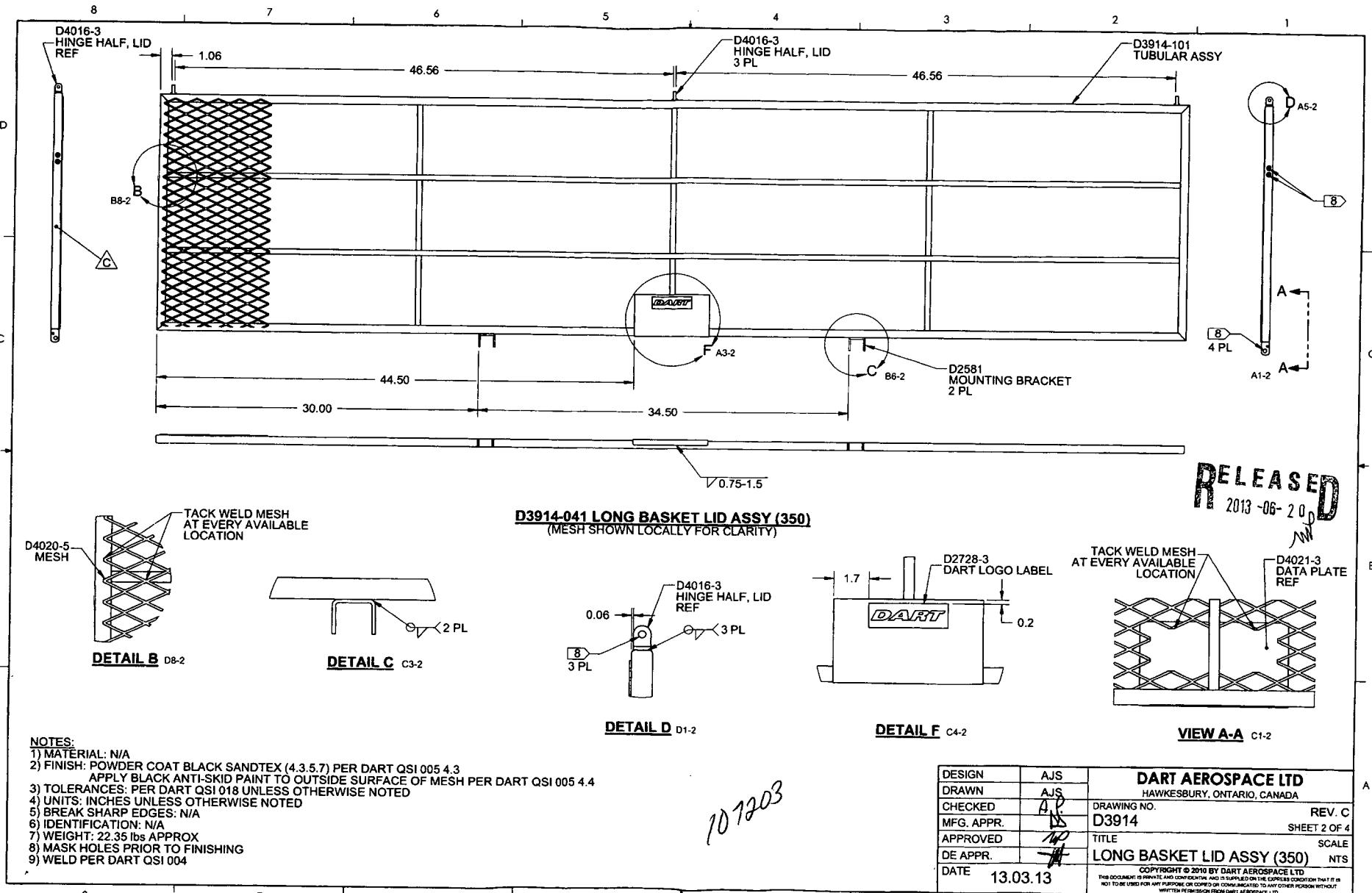
Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS							
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>						
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>						
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>						
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>							
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector				
Doc/Data													
Equip/Tooling													
Operator													
Material													
Setup													
Other													
Process													
Supplier													
Training													
Unapproved													
FAULT CATEGORY													
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions						<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other			

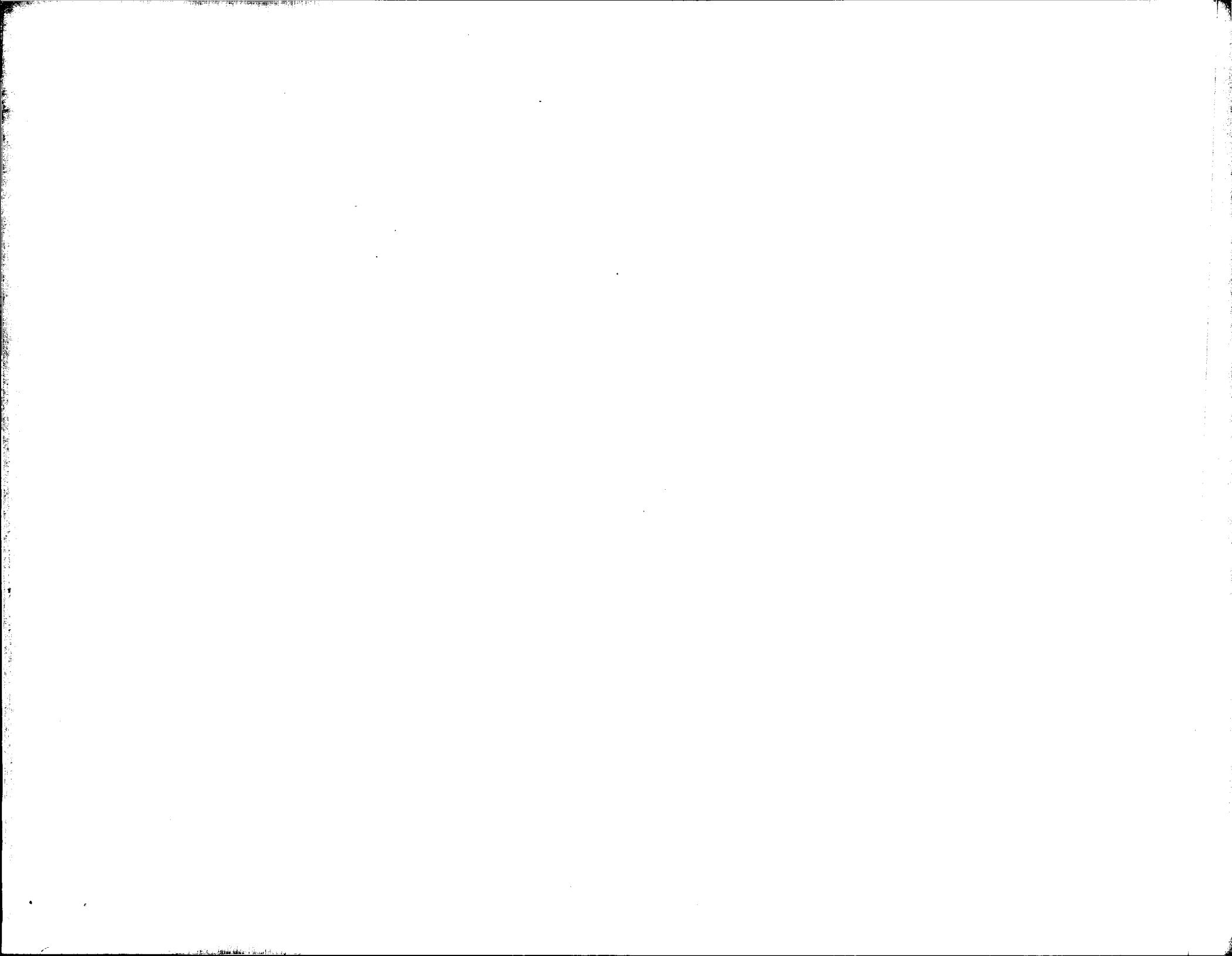
ITEM	QTY 041	P/N	DESCRIPTION
	X	D3914-041	LONG BASKET LID ASSY (350)
1	1	D3914-101	TUBULAR ASSY, LONG LID
2	2	D2581	MOUNTING BRACKET
3	1	D2728-3	DART LOGO LABEL
4	3	D4016-3	HINGE HALF, LID
5	1	D4020-5	LID MESH, 350 LONG BASKET
6	1	D4021-3	DATA PLATE

**D3914-041 LONG BASKET LID ASSY (350)**  
(MESH SHOWN LOCALLY FOR CLARITY)

C	REFER TO SHEET 3 D4035-041 DELETED AND REPLACED BY D4035-043. REASON: PROPARM NO LONGER OFFERED.	AJS	13.03.13
B	REMOVED D4086-210, UPDATED DETAIL F ACCORDINGLY (A-2). REASON: NOW INSTALLED BY OPERATORS PER D350-607-2 REV. C AND D350-607-3 REV. A.	MB	10.09.05
A	NEW ISSUE	JPH	10.03.16
REV.	DESCRIPTION	BY	DATE
DESIGN	AJS	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWN	AJS	DRAWING NO. REV. C	
CHECKED	A.P.	D3914 SHEET 1 OF 4	
MFG. APPR.	DS	TITLE SCALE	
APPROVED	ND	LONG BASKET LID ASSY (350) NTS	
DE APPR.	ND	COPYRIGHT © 2010 BY DART AEROSPACE LTD	
DATE	13.03.13	THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN APPROVAL FROM DART AEROSPACE LTD	

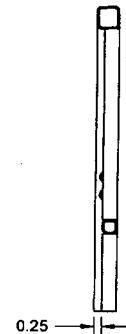
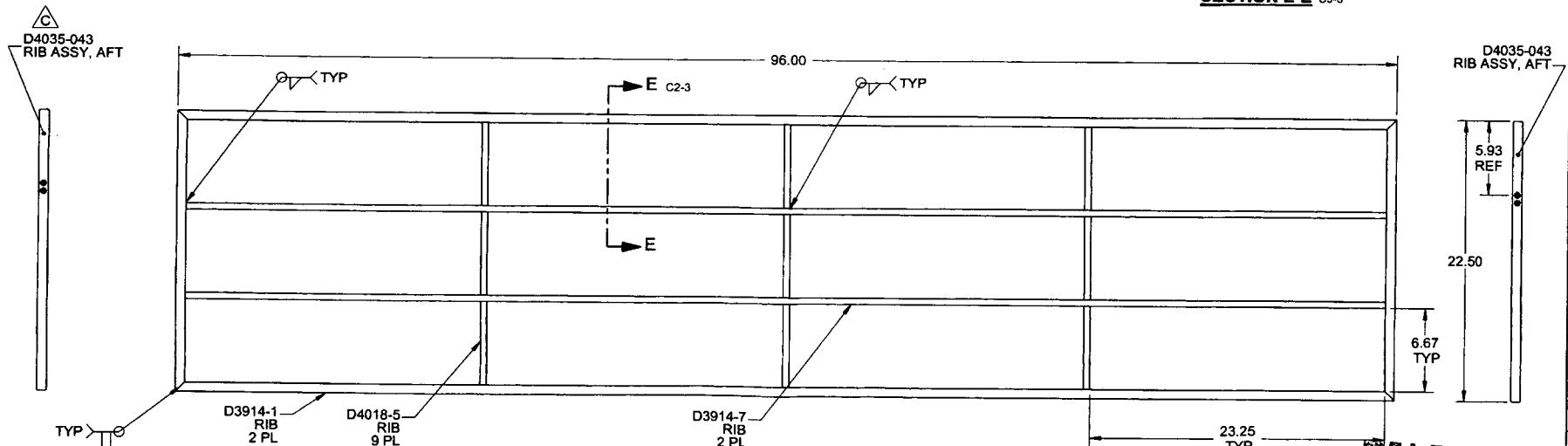






ITEM	QTY -101	P/N	DESCRIPTION
	X	D3914-101	TUBULAR ASSY, LONG LID (350)
1	2	D3914-1	RIB
2	2	D3914-7	RIB
3	9	D4018-5	RIB
4	2	D4035-043	BASKET LID RIB ASSY, AFT

C

**SECTION E-E** C5-3

**RELEASED**  
2013-06-20  
*[Signature]*

**8> D3914-101 TUBULAR ASSY, LONG LID***(07203)*

**NOTES:**

- 1) MATERIAL: N/A
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 14.10 lbs
- 8) TOLERANCE FOR XX.XX DIMENSIONS ±0.06 FOR D3914-101
- 9) WELD PER DART QSI 004

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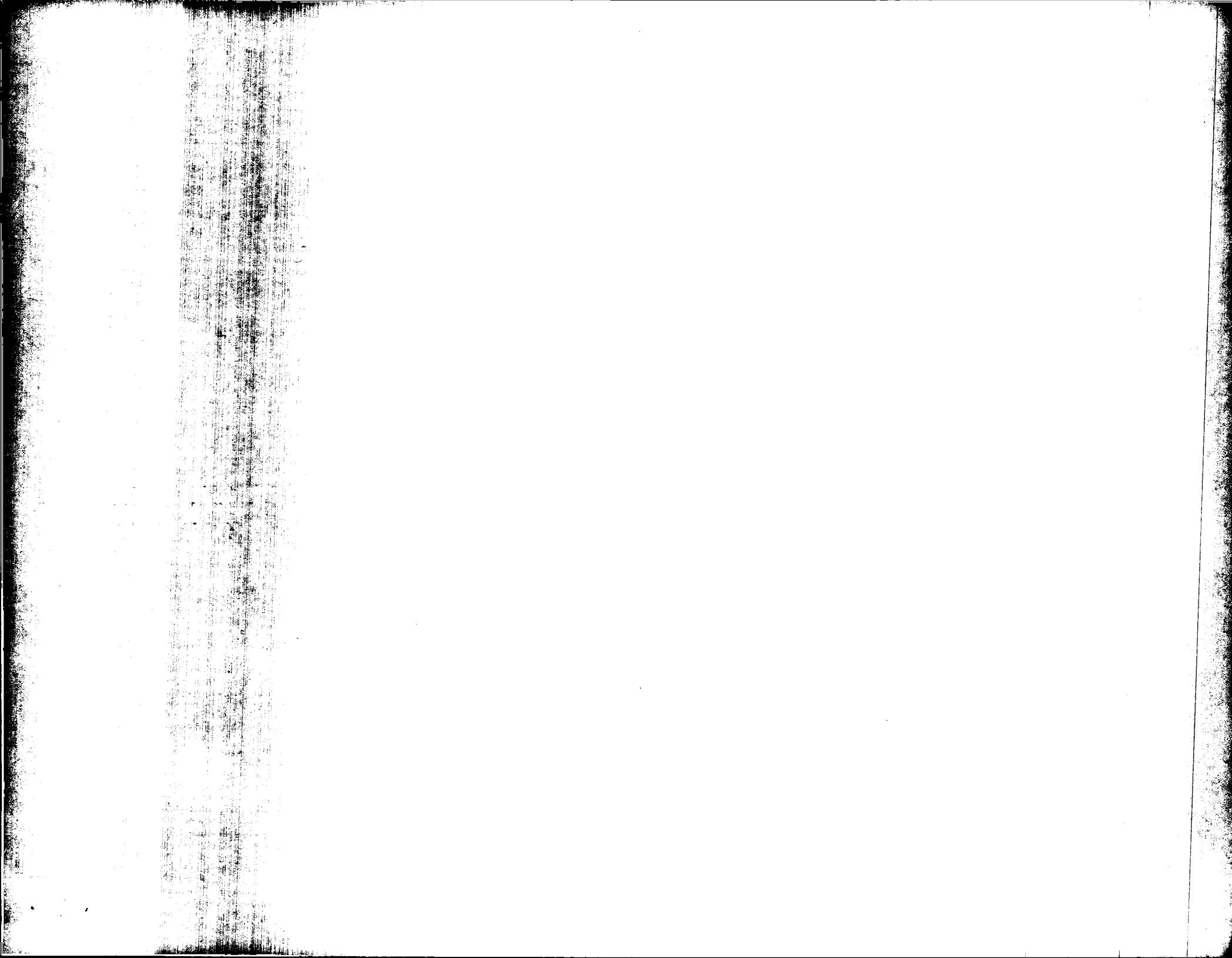
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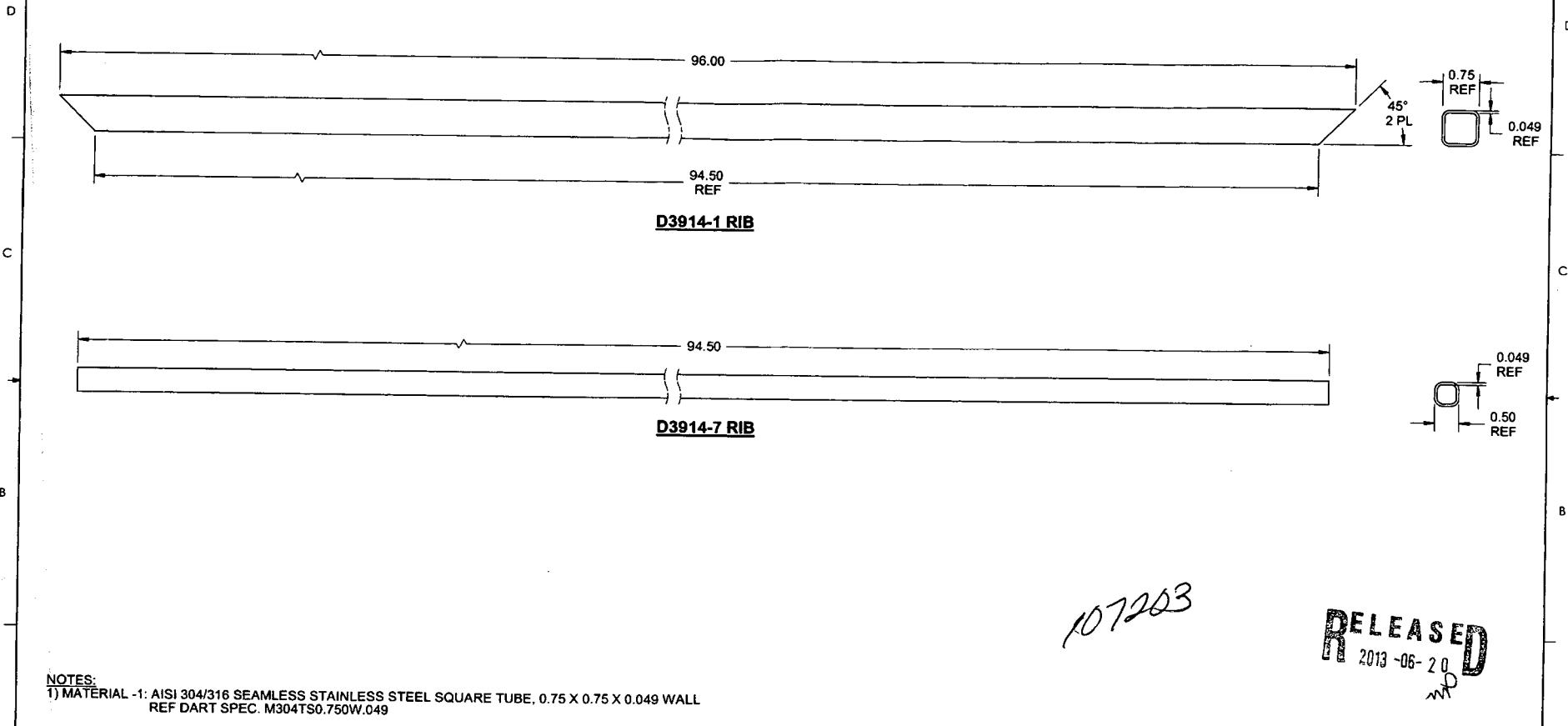
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DESIGN	AJS	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWN	AJS		
CHECKED	<i>AP</i>	DRAWING NO. D3914	
MFG. APPR.	<i>DS</i>	REV. C	SHEET 3 OF 4
APPROVED	<i>MM</i>	TITLE	
DE APPR.	<i>MM</i>	SCALE	
DATE	13.03.13	LONG BASKET LID ASSY (350) NTS	

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107203

RELEASED  
2013-06-20

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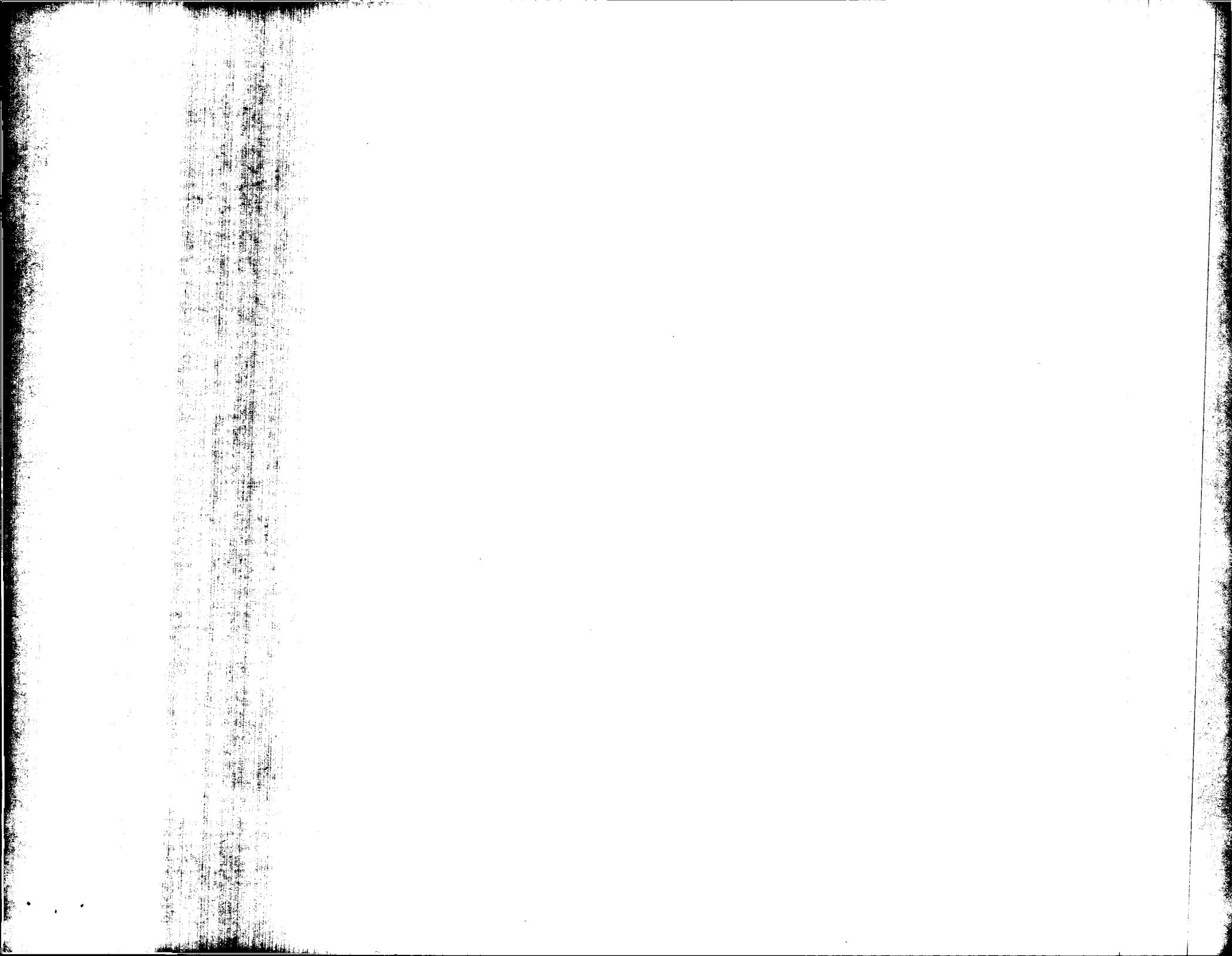
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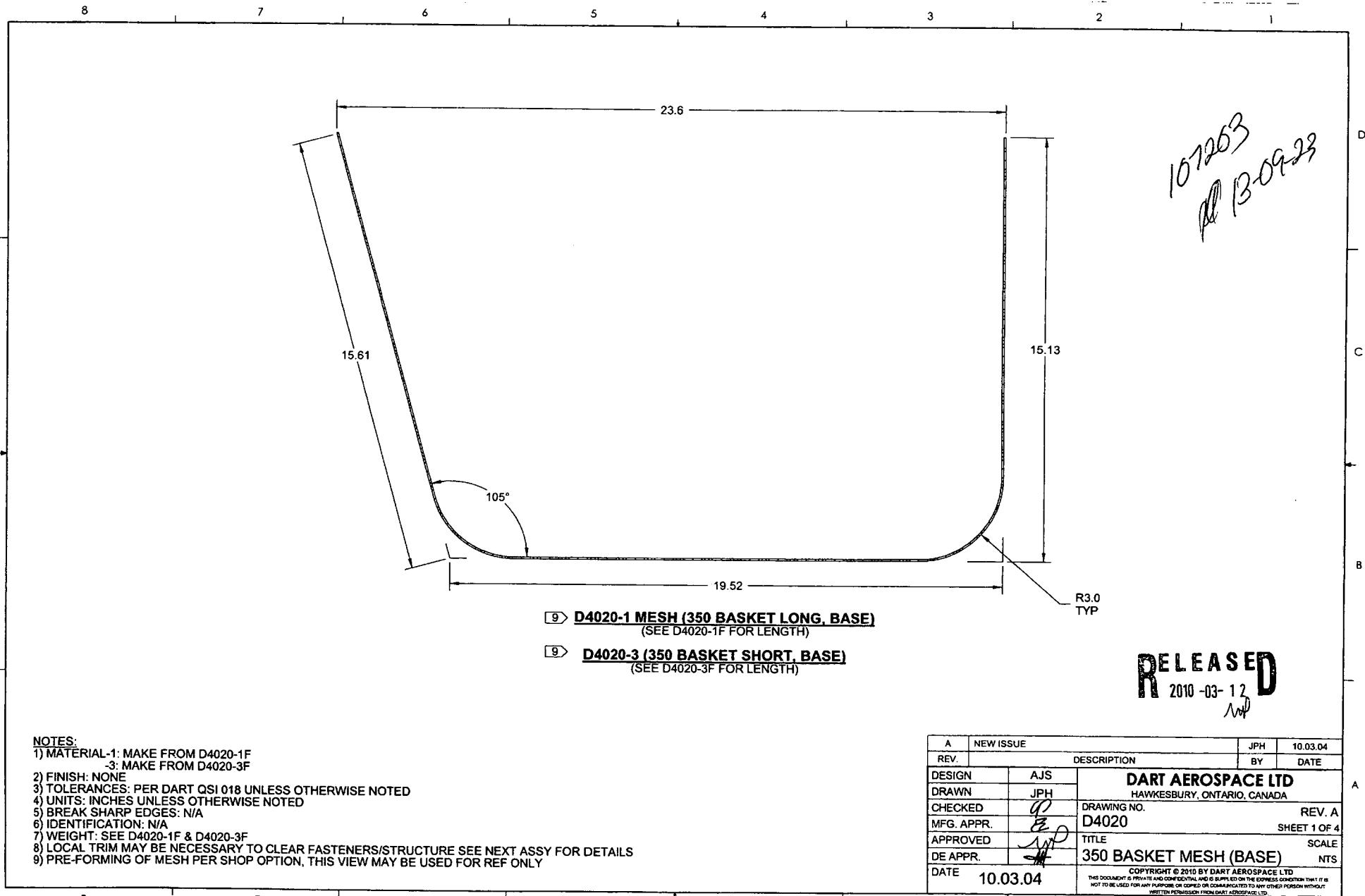
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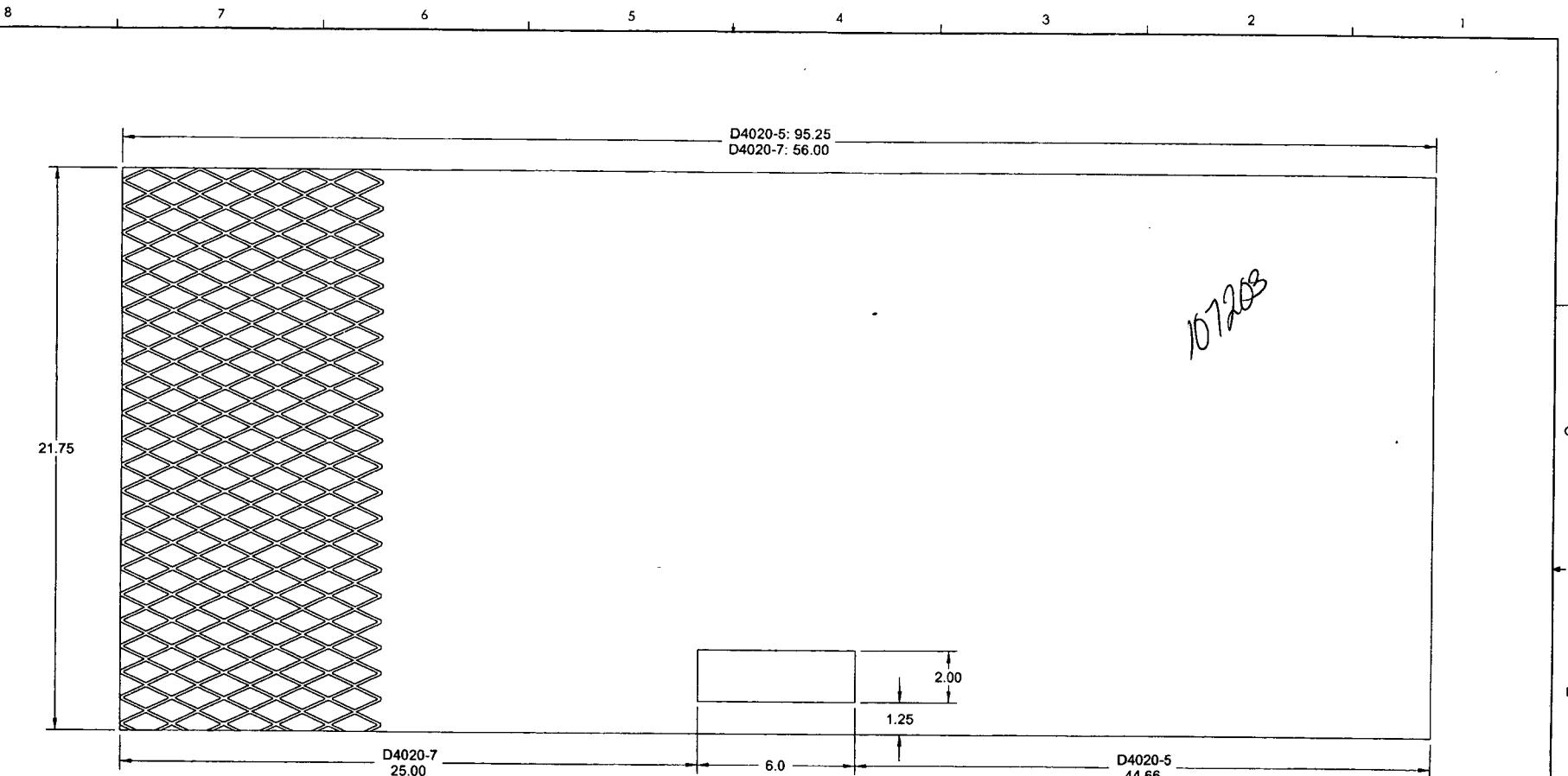
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⑨ **D4020-5 MESH (350 BASKET LONG, LID)**  
(LOCAL SECTION MESH SHOWN FOR CLARITY)

⑨ **D4020-7 MESH (350 BASKET SHORT, LID)**  
(LOCAL SECTION MESH SHOWN FOR CLARITY)

NOTES:  
 1) MATERIAL: AISI 304/316 EXPANDED STAINLESS STEEL MESH 3/4-16F  
 REF DART SPEC. M304EX0.75-16F  
 2) FINISH: NONE  
 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED  
 4) UNITS: INCHES UNLESS OTHERWISE NOTED  
 5) BREAK SHARP EDGES: N/A  
 6) IDENTIFICATION: N/A  
 7) WEIGHT -5: 0.80 lbs APPROX  
     -7: 4.49 lbs APPROX  
 8) LOCAL TRIM MAY BE NECESSARY TO CLEAR FASTENERS/STRUCTURE SEE NEXT ASSY FOR DETAILS  
 9) TOLERANCE ON XX.XX DIMENSIONS ± 0.06.

RELEASED  
2010-03-12  
N/A

DESIGN	AJS	DART AEROSPACE LTD	
DRAWN	JPH	HAWKESBURY, ONTARIO, CANADA	
CHECKED	GJ	REV. A	
MFG. APPR.	Z	D4020	
APPROVED	JW	SHEET 2 OF 4	
DE APPR.	N/A	TITLE	SCALE
DATE	10.03.04	350 BASKET MESH (BASE)	

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